

http://www.business.mo.gov/

## **BUSINESS REGISTRATION CHECKLIST**

As you prepare to register your business, please use this checklist to ensure that you have the information needed to successfully complete your registration. The links provided at the end of each section will take you to web sites that can provide a more detailed explanation of the information required.

## **Name Check**

Before drafting articles of organization, it is imperative that you check the
availability of the desired business name with the Secretary of State's office,
https://www.sos.mo.gov/BusinessEntity

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	https://www.sos.mo.gov/BusinessEr	ntity
	a mala im	•
_	ership	
Ц		nation guidelines to select the proper business
		puribusiness.net/doingbusiness/legalform.pdf
	• Ownership types: Sole owner	Doutnoughin
		Partnership Government
	Limited Partnership Trust	Corporation
		Estate
	Limited Liability Company Indian Tribe	Religious Organization
	Fraternal Organization	Labor Organization/Union
	Association	Other Not-for-Profit
	Limited Liability Partnership	Limited Liability Limited Partnership
		ary of State, will need registration or charter
_	number and date of registration or cl	
П	If non-Missouri corporation, need co	
_	registration/charter date	or demonity number and
	•	Missouri Secretary of State, need to state why
		g business under a name other than its true
		titious name. All Missouri corporations,
		ted partnerships and limited liability
	• •	ster. In most cases foreign entities are required
		ant to consult with an attorney or an
		business meets one of the exemptions
	If a non-profit corporation, need:	•
		on is a public benefit or mutual benefit
	corporation	•
	• See the Secretary of State's Corp	porations Division for more information,
	http://www.sos.mo.gov/business	
	If Limited Liability Company (LLC	
	Management by manager or mer	mbers
	• Tax type: Partnership, Sole Own	ner, Corporation
	If Limited Partnership (LP), need:	-
	• General Partner and Limited Par	tner information and other matters the general
	partners want to include	
	If Limited Liability Partnership (LL	P), need:
	• Number and names of partners	

	For more information, refer to the Secretary of State's <u>Starting a Business</u> page, <a href="http://www.sos.mo.gov/business/corporations/startBusiness.asp">http://www.sos.mo.gov/business/corporations/startBusiness.asp</a>
Reai	stered agent
_	If you use a Registered Agent, provide the name and address of the registered
	agent.
	For more information, refer to the Secretary of State's FAQ page regarding Registered Agents, http://www.sos.mo.gov/business/corporations/faqs.asp#toc2
Fede	eral Employer Identification Number
	If required to register your business with the Internal Revenue Service (IRS), you will need to have the Federal Employer Identification Number (FEIN) for your business. The IRS requires most businesses that employ workers, including all corporations, to have a FEIN.
	For more information, refer to the Internal Revenue page on Employer ID umbers, <a href="http://www.irs.gov/businesses/small/article/0,,id=98350,00.html">http://www.irs.gov/businesses/small/article/0,,id=98350,00.html</a> .
Busi	ness Name and Address
	Legal business name Mailing address (including county) Physical location (if different) Telephone number
Addi	tional Business Locations
	Describe the business activity, stating the major products sold and/or services
	provided Street/physical address of business and county
	Inside or outside city limits Nature of Business
	Trade Name of Business (if any)
	er, Officers, Partners, Members or Spouse (of sole owner) mation
	Name
	Title
	Effective date of title Social Security Number (SSN) and birth date for individual(s)
ā	
_	Home address
	City, county, state, zip code Percent of ownership
	Duration of business
	• The events, if any, on which the business is to dissolve or the number of years the business is to continue. May be any number or perpetual.
	<ul> <li>The answer to this question could cause possible tax consequences. You may wish to consult with your attorney or accountant.</li> </ul>
	with to combain with your attorney of accountain.

ıı pu	irchased business from a previous owner
	Previous owner's name Date purchased Previous business name, address, Missouri tax ID number, FEIN Purchase price and what was purchased Percentage of previous business purchased Common ownership, management or control between previous owner and new owner
lf an	plying for sales/use tax
-	Estimated monthly sales
N	Type of sales – food, liquor, tobacco, school textbooks or supplies  For more information, see the Department of Revenue's Sales/Use Tax page, <a href="http://www.dor.mo.gov/tax/business/sales/">http://www.dor.mo.gov/tax/business/sales/</a> OTE: Your application can be processed, but a sales/use tax bond is required efore a license can be issued.
If re	gistering for withholding
	Estimated monthly wages
	FEIN (unless you are hiring a household employee)
	For more information, see the Department of Revenue's <u>Employer Withholding</u> page, <a href="http://www.dor.mo.gov/tax/business/withhold/">http://www.dor.mo.gov/tax/business/withhold/</a> , or the <u>Frequently Asked Questions</u> page, <a href="http://www.dor.mo.gov/tax/business/faq/register.htm">http://www.dor.mo.gov/tax/business/faq/register.htm</a> .
If re	gistering for unemployment tax
	First date worker(s) hired
	First date worker(s) paid
	Amount of wages paid quarterly and/or to-date
	Average number of worker(s)
	Number of weeks per calendar year worker(s) have been employed to-date  For more information, see the Department of Labor and Industrial Relations
_	Unemployment Insurance Tax page, www.mouitax.com
	Onemproyment insurance Tax page, www.mourtax.com
If lea	asing employees
	Name, mailing address and contact telephone number of leasing company or
	client
	Date agreement began
	Date agreement ceased
	Number of worker(s) that are not covered under the agreement
_	For more information, refer to the Department of Labor and Industrial Relations Unemployment Insurance Tax page, http://www.dolir.mo.gov/es/ui-tax/main.htm